ATTORNEYS DOCKET NO. TRANSMITTAL LETTER TO THE UNITED STATES 5529PC-1 DESIGNATED/ELECTED OFFICE (DO/EO/US) U.S. APPLICATION NO. (If known, see 35 CFR 1.5) **CONCERNING A FILING UNDER 35 U.S.C. 371** not yet assigned PRIORITY DATE CLAIMED INTERNATIONAL APPLICATION NO. INTERNATIONAL FILING DATE 31 March 2005 31 March 2004 PCT/KR2005/000932 TITLE OF INVENTION EXTRACT OF NELUMBINIS SEMEN FOR THE TREATMENT OF DEPRESSION, MEDICINAL COMPOSITE AND

U.S. A	APPLICAT	ION NO. (I	f known, see 37 CF	R 1.5)	INTERNATIONAL APPLICATION NO.			ATTORNEY'S DOCKET NUMBER			
not yet assigned						PCT/KR2005/000932			5529PC-1		
20. The following fees are submitted:									Applicant use		Office use only
\boxtimes	a) Basic national fee									300.00	
\boxtimes	b) Examination fee							\$200.00	\$	200.00	
\boxtimes	⊠ c) Search fee					\$400.00			\$	400.00	
TOTAL OF ABOVE CALCULATIONS = \$900.00									\$	900.00	
Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250.00 for each additional 50 sheets of paper or fraction thereof.											
Total	Sheets		Futro Shoots Number of			f each additional 50 or fraction RATE					
	46	6 -100 =	-54 /50 =			0		x \$250.00	\$	0	
			funishing the oat CFR 1.492(e))	h or declarati	ion la	ater than 30 months from	m the e	arliest	\$		
CLAIMS			NUMBER FILED			NUMBER EXTRA		RATE			
Total claims		12 - 20		=	0		x \$50.00	\$	0.00		
Independent claims			4 - 3		=	1		x \$200.00	\$	200.00	
MULTIPLE DEPENDENT CLAIM(S) (if applicable) + \$360.00								\$			
TOTAL OF ABOVE CALCULATIONS =									\$	1,100.00	
Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.									\$	į	
SUBTOTAL =									\$		
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).									\$		
TOTAL NATIONAL FEE =											
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31) \$40.00 per property +											
						TOTAL FEES ENCLOSED =			\$	1,100.00	
							Amount to be refunded: Amount to be charged:			////	\$
											ĮΦ
a.						the above fees is end			00	4 t h-	ahaya faas
b.	Please charge my Deposit Account No. <u>191970</u> in the amount of \$ <u>1,100.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.										
c.	The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayme to Deposit Account No. 19-1970. A duplicate copy of this sheet is enclosed.										
d.	Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.										
NOT 1.13	E: Wher 7(a) or (l	re an appr b)) must b	opriate time lin	nit under 37 nted to rest	CFI core	R 1.494 or 1.495 has the application to pe	not b ending	een met, a pe g status.	etiti	on to revive (37	' CFR
		**	ONDENCE TO:			Pals-OK					
SHERIDAN ROSS P.C. 1560 Broadway, Suite 1200						SIGNATURE					
Denver, Colorado 80202-5141 Telephone: (303) 863-9700						Paul S. Cha					
Facsimile: (303) 863-0223						Registration No	. 54,02	22			
10110	TOMED	NO 2244	9								